

Arizona Department of Economic Security  
Division of Aging and Adult Services, Site Code 950A  
Congregate Meals Report

1. Contractor Name	2. For Month of	3. PSA #
--------------------	-----------------	----------

**Part I - Service Data**

	Month To Date		Fiscal Year To Date	
	(A) New Individuals	(B) Total Meals	(C) Total Individuals	(D) Total Meals
4. Elderly 60+ or Spouse -60				
5. Disabled -60 in Congregate Housing				
6. Disabled -60 in 60+ Household				
7. Meal Program -60 Volunteer				
8. Total NSIP Eligible (Add lines 5-8)				
9. Other Disabled -60				
10. Total Eligible Served				
11. Others -60 not disabled or spouse or guest				
12. Total Served (Add lines 10-11)				

**Part II - Demographic Data**

	Month To Date		Fiscal Year To Date	
	( E ) New Individuals -60	( F ) New Individuals 60+	( G ) Total Individuals -60	( H ) Total Individuals60+
13. White				
14. American Indian/Alaska				
15. Asian/Pacific Islander				
16. Black				
17. Hispanic				
18. One other race alone				
19. Two or more races				
20. Total Individuals served				
21. 60-74				
22. 75-84				
23. 85 and over				
24. Female				
25. Male				
26. Frail/Disabled				
27. Residents Rural Areas				
28. Low Income Non-Minority				
29. Low Income Minority				

30. Prepared by	31. Date
32. Phone Number (      )	33. E-Mail Address (      )

## Congregate Meals Report (AG-030A) Completion Instructions

### Purpose

The purpose of this document is to capture relevant information on individuals receiving Congregate Meals. This document captures demographic data for individuals receiving Congregate Meals and provides details on unduplicated individuals receiving meals and total meals served.

Boxes 1-3

1. Contractor Name – enter the name of the agency reporting the information.
2. For month of – enter the month/year services are provided.
3. Planning and Service Area Number - enter the region number.

### Part I – Service Data

The numbers entered in this section pertain to new and current individuals who have received meals within the fiscal year.

Lines 4 to 12:

Column A – for each category, enter the total number of **NEW** individuals who have received a meal for the first time during the fiscal year. An individual can only be counted once.

Column B – for each category, enter the total number of meals served. These units must correspond to units reported on the AG-053.

Column C – for each category, enter the total number of individuals who have received a meal year-to-date for the fiscal year.

Column D – for each category, enter the total number of meals served year-to-date for the fiscal year.

### Part II - Demographic Data

Lines 13-29

Columns E and F: The numbers entered in this section pertain to **NEW** individuals under 60 or 60 years of age or older, who have received a meal for the first time during the fiscal year.

Lines 13 through 19 – Ethnicity: for each category, enter the number of new individuals who have received a meal during the month in each appropriate column. Please note that the categories of “one other race alone” and “two or more races” has been added to the form, but is not required to be collected at this time.

Lines 20 - Total: enter the sum of lines 13-19 for both columns.

Line 21 through 23 - Age: enter the number of new individuals served during the month by age category for Column F only.

Line 24 and 25 – Sex/Gender: enter the number of new individuals served during the month by gender category.

Line 26 - Frail/Disabled: enter the number of new individuals served during the month who have a physical or mental disability, including Alzheimer's Disease or other neurological or organic brain disorder or are considered frail.

Line 27 - Residents of Rural Areas: enter the number of new individuals served during the month who reside in rural areas as defined by the U.S. Census Bureau. Tribal Reservations are considered rural.

Line 28 - Low-Income Non-Minority: enter the number of new individuals served during the month who have been identified with an ethnicity of "White" with an annual income at or below the Federally established poverty level.

Line 29 - Low-Income Minority: enter the number of new individuals served during the month who have been identified with an ethnicity of "American Indian/Alaska Native", "Asian/Pacific Islander", "Black", or "Hispanic" with annual income at or below the Federally established poverty level.

*Columns G and H*: The numbers entered in this section pertain to individual who have received a meal in prior months and the current month during the current fiscal year.

Lines 13-29: all entries made in this section should be the total number of individuals served, year-to-date during the fiscal year.

Boxes 31-34

31. Prepared by – enter the printed name of the individual who prepared the report and/or is responsible for the report.
32. Date – enter the date the report is submitted.
33. Phone – enter the phone number of the person who prepared the report and/or is responsible for the report.
34. E-mail – enter the e-mail address of the person who prepared the report and/or is responsible for the report.